

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Business Regulation INSURANCE DIVISION 233 Richmond Street, Suite 233 Providence, RI 02903-4233

TEL #: (401) 222-2223 FAX #: (401) 222-5475

October 17, 2005 Original May 24, 2006 Revision

To: INDIVIDUAL(S) RESPONSIBLE FOR STATE FILINGS

From: Kenneth R. DiLeone

Senior Insurance Examiner

RE: Summary of Annual and Quarterly Filing Requirements for 2006,

Fraternal Societies

<u>Domestic and foreign</u> Fraternal Societies should review the following attached pages:

- The NAIC's "General Instructions" for Fraternal Societies;
- The NAIC's "Fraternal Societies Checklist", annotated for filing in R.I.;
- The R.I. Insurance Division's "Notes and Instructions";
- The R.I. Insurance Division's "Special Reporting Requirements" (Fraternal Societies need to respond only to Special Reporting Requirement #1); and
- The R.I. Insurance Division's "Contracted Producer Report" (also available on-line at: http://www.dbr.state.ri.us/pdf_forms/cprbull_exb.pdf).

FOREIGN Fraternal Societies are required to submit to the R.I. Insurance Division, on or before the due dates indicated, only those <u>seven</u> items listed in the Checklist, Section V - State Required Filings.

- Do NOT combine multiple Societies on the same Affidavit of Filing;
- Do NOT file a printed copy of the Annual Statement nor any Separate Accounts Statement;
- Do NOT file a PDF-formatted version of those statements on CD-ROM;
- R.I. Renewal/Filing Fees, due on 05/01/06, should NOT be included with the above filings; our invoice will be mailed to the Society on or about 04/01/06.

<u>DOMESTIC</u> Fraternal Societies are required to submit the following items to the R.I. Insurance Division on or before the dates indicated:

- 03/01/06: A complete Annual Statement, a Separate Account Statement (if appropriate), on paper as well as in PDF format on CD-ROM, and a Risk-Based Capital Report, with original signatures on Jurat Pages; a copy of the Checklist with Column 1 completed; and any NAIC Supplementals or R.I.-Required Filings listed in Sections II or V of the Checklist as due on this date.
- **04/01/06**: Any NAIC Supplements, on paper as well as in PDF format on CD-ROM; and any R.I.-Required Filings listed as due on this date.
- 05/01/06: Payment of R.I. Filing Fees due as per our 04/01/06 invoice.
- **05/15/06**: A Quarterly Statement, with original signatures on the Jurat Page, <u>on paper as well as in PDF format on CD-ROM</u>. This filing requirement repeats on **08/15/06** and **11/15/06**.
- 06/01/06: Audited Financial Statements, on paper as well as in PDF format on CD-ROM.
- **06/30/06**: The Supplement to Valuation Report.
- Each domestic Fraternal Society must also file electronically with the NAIC via CD-ROM, diskette, or the Internet as part of the NAIC's total filing requirements.

Whether a domestic or foreign Fraternal Society, please read "Notes and Instructions" before submitting any material. Thank you in advance for your cooperation. Feel free to contact me directly at (401) 222-5477, by FAX at (401) 222-5475, or by e-mail at Ken_DiLeone@dbr.state.ri.us if you have any questions regarding these filing requirements.

FilingRequirements-2005-Fraternal.doc

General Instructions For Companies to Use Checklist

Please Note:

This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send mailing labels and other information to all companies but will not be sending their own checklist this year.

<u>Electronic filing is intended to include filing via the Internet or filing via CD with the NAIC.</u> Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

This column provides the company a method for marking completed forms or filings. Place an "X" next to each item included.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The *Annual Statement Electronic Filing* includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The *March .PDF Filing* is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The **Separate Accounts Electronic Filing** includes the separate accounts annual statement and investment schedule detail.

The **Separate Accounts** .**PDF Filing** is the .pdf file for the separate accounts annual statement and investment schedule detail.

The **Supplemental Electronic Filing** includes all supplements due April 1, per the *Annual Statement Instructions*.

The Supplemental .PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The **Quarterly Electronic Filing** includes the complete quarterly filing and the PDF files for all quarterly data.

The **Quarterly** .**PDF Filing** is the .pdf file for quarterly statement data.

The *June .PDF Filing* is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (E) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally, on its website). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*..

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.

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FRATERNAL SOCIETIES CHECKLIST

COMPANY NAME:		NAIC Company Code:
Contact:		Telephone:
REQUIRED FILINGS IN THE STATE OF:	Rhode Island	Filings Made During the Year 2006

(1)	(2)	(3)	NILIME	(4) EB OF CC	DIEC*	(5)	(6) FORM	(7)
Check-	Line	REQUIRED FILINGS FOR THE ABOVE STATE	NUMBER OF COPIES* Domestic Foreig		DUE DATE	SOURCE**	APPLICABLE NOTES	
list	#		State	NAIC	n State			NOTES
		I. NAIC FINANCIAL STATEMENTS	O Late		- Clare			
	1	Annual Statement (8 ½"x14")	1	1	XXX	3/1	NAIC	Note L
	1.1	Printed Investment Schedule detail (Pages E01- E25)	1	1	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	1	1	XXX	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 ½"x 14")	1	1	XXX	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	1	1	XXX	4/1	NAIC	
	11	Interest Sensitive Life Insurance Products Report	1	1	XXX	4/1		
	12	Investment Risk Interrogatories	1	1	XXX	4/1		
	13	Long Term Care Experience Reporting Forms	1	1	XXX	4/1		
	14	Management Discussion & Analysis	1	1	XXX	4/1		
	15	Medicare Supplement Insurance Experience Exhibit	1	1	XXX	3/1		
	16	Risk-Based Capital Report	1	1	XXX	3/1		
	17	Statement of Actuarial Opinion	1	1	XXX	3/1		
	18	Statement on non-guaranteed elements – Exhibit 5	1	1	XXX	3/1	Company	
	19	Interr. #3 Statement on participating/non-participating policies – Exhibit 5, Inter. #1	1		xxx	3/1		
	20	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	21	Trusteed Surplus Statement	1	1	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
		III. ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	XXX	1	XXX	3/1	NAIC	
	31	March .PDF Filing	1	1	XXX	3/1		Note O
	32	Separate Accounts Electronic Filing	XXX	1	XXX	3/1		11010 0
	33	Separate Accounts .PDF Filing	1	1	XXX	3/1		Note O
	34	Supplemental Electronic Filing	xxx	1	XXX	4/1		11010 0
	35	Supplemental .PDF Filing	1	1	XXX	4/1		Note O
	36	Quarterly Statement Electronic Filing	xxx	1	XXX	5/15, 8/15 & 11/15	NAIC	110.0
	37	Quarterly .PDF Filing	XXX	1	xxx	5/15, 8/15 & 11/15	NAIC	Note O
	38	June .PDF Filing	1	1	XXX	6/1	NAIC	Note O
		IV. AUDITED FINANCIAL STATEMENTS					NAIC NAIC NAIC NAIC NAIC Company NAIC NAIC Company Company NAIC NO NAIC NAIC NO State No State State No State No State No State State No State State No State No State State State State State State State State State	
	51	Accountants Letter of Qualifications	1	N/A	N/A		Company	
	52	Audited Financial Statements	1	1	XXX	6/1		
	53	Audited Financial Statements Exemption Affidavit	1	N/A	N/A			
	54	Independent CPA	1	N/A	N/A			
	55	Notification of Adverse Financial Condition	1	N/A	N/A			
	56	Report of Significant Deficiencies in Internal Controls	1	N/A	N/A		Company	
	57	Request for Exemption to File	1	N/A	N/A		Company	
	1	V. STATE REQUIRED FILINGS						
	101	Certificate of Compliance	xxx	0	1	3/1	State	
	102	Certificate of Deposit	XXX	0	1	3/1		
	103	Certificate of Valuation	XXX	0	1	3/1		
	104	Filings Checklist (with Column 1 completed)	1	1	1	3/1		
	105	Premium tax (R.I.G.L.§44-17-1)	1	0	1	3/1		Note D
	106	State Filing Fees (R.I.G.L. §27-25-27).	1	0	1	5/1		Note C
	107	Signed Jurat	XXX	XXX	1	3/1		Note L
	108	Contracted Insurance Producer Report (R.I.G.L. §27-2.4-4)	1	0	1	3/1		
	109						1	
			 	†	 	†	1	
	110							

^{*}If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

A Required Filings Contact Person: Kenneth DiLeone or Matt DiMaio E-mail: Ken_DiLeone@dbr.s Phone: (401) 222- E-mail Mdimaio@dbr.st Phone: (401 222- B Mailing Address: R.I. Insurance Division 233 Richmond Street, Suite 233	5477 ate.ri.us
B Mailing Address: R.I. Insurance Division	5 15 1
Providence, RI 02903-4233	
C Mailing Address for Filing Fees: Do NOT send fees prior to receipt of renewal invoice. Invoices will be mailed on March 1 st ; payment is due Ap Mailing address is the same as that for Note B.	oril 1 st .
D Mailing Address for Premium Tax Payments: R.I. Division of Taxation, Corporate Taxes Section 1 Capitol Hill E- mail:eflanagan@tax.state.ri.us Providence, RI 02908 Phone: (401) 2	22-1120
E Delivery Instructions: All items must be postmarked no later than the indicated date. If that due date falls on a weekend or a holiday, the due date is extended to the next business day.	
F Late Filings: Insurance companies will be fined \$100 per day for late f pursuant to R.I.G.L. §27-12-1(c).	ïling
G Original Signatures: Domestic insurers: Original signatures required for all fi Foreign insurers: Facsimile signatures accepted as per th NAIC's "Annual Statement Instructions	e
H Signature/Notarization/Certification: The CEO, President, Secretary, and Treasurer are expected sign the Jurat Page; those signatures must be notarized.	ed to
I Amended Filings: Amended items should be filed within 10 days of their amendment, along with an explanation of the amendment there are signature requirements for the original filing, sa should be followed for any amendment.	
J Exceptions from normal filings: Domestic insurers: Extensions, when necessary, may be requested in accordance with R.I.G.L. §27-12-1 Foreign insurers: File copy of domestic extension approx	
K Bar Codes (State or NAIC) Please follow the NAIC's "Annual Statement Instructions"	
L Signed Jurat Foreign insurers must complete and file one printed copy each company; do NOT file a printed copy of the annual statement, nor a PDF-formatted version on CD-ROM.	for
M NONE Filings: Please follow the NAIC's "Annual Statement Instructions	s."
N State of Rhode Island Information Foreign insurers: Pursuant to Rhode Island General Law 1.1, all insurers' doing business in RI are required to pro- toll free number or to accept collect calls from RI Reside	vide a
O Electronic Filing Requirements All annual, quarterly and supplemental filings in .PDF fo should be submitted on CD-ROM.	rmat

DEPARTMENT OF BUSINESS REGULATION INSURANCE DIVISION

RHODE ISLAND SPECIAL REPORTING REQUIREMENTS

- Fraternal Organizations must respond to #1 only.
- Life Insurers should respond to #1 and #7 only.
- Property and Casualty Insurers should respond to all reports, #1 through #8.
- Surplus Lines Carriers should respond to #4 only.
- Health Insurers (aka HMOs, or HMDIs), Risk Retention Groups, Title Companies and Accredited or Approved Reinsurers are exempted from the filing requirements listed on this page.

NOTES for Reporting Requirements 2 through 8: Special forms do not exist for those reports. It is suggested that the company file the required report(s) on company letterhead; the absence of a filed report will be deemed to be a "NONE" report.

1. Contracted Insurance Producer Report:

Due March 1

Companies contracting with insurance producers are required to file an annual report regarding those producers, and pay appropriate fees. See R.I. General Laws (R.I.G.L.) §27-2.4-4 and the Contracted Producer Report (attached, and also available on-line at: http://www.dbr.state.ri.us/pdf_forms/cprbull_exb.pdf) for detailed reporting requirements. Companies with no reportable business must file a "NONE" report. For any questions, contact Molly Champagne-Seward, Licensing Coordinator at 401-222-5456.

2. Professional Liability Insurance Report:

Due March 1

Insurers writing liability insurance for health care professionals, dentists, or dental hygienists are required to file an annual report regarding that activity. See R.I.G.L. §42-14-2.1(c) for detailed reporting requirements. Please reply to Teresa DeLuca, Property & Casualty Section.

3. Assigned Risk Plan Report:

Due April 1

Insurers participating in an Automobile Liability and/or Physical Damage Assigned Risk are required by R.I.G.L. §31-33-8 to file an annual report of the total amount of premiums written and total losses incurred during the most recent calendar year in such plan(s). Please reply on an individual company basis, under separate cover to Kenneth R. DiLeone, Senior Insurance Examiner.

4. Liquor Liability Report:

Due April 1

Insurers writing liquor liability insurance are required by R.I.G.L. §3-14-14 to file an annual report of the total number of policies and dollar amount of premiums written, and the number and amount of claims paid under Liquor Liability Insurance policies. Please reply on an individual company basis, under separate cover to Matt DiMaio, Principal Licensing Insurance Examiner.

5. Workers' Compensation Annual Report (R.I.G.L. §27-7.1-7.2):

Due May 15

R.I. Insurance Regulation 54, Section 4 enumerates filing requirements. Please reply on an individual company basis, under separate cover, to Eugene Daigneault, Senior Field Auditor.

6. Automobile Insurance Annual Report (R.I.G.L. §27-9-55):

Due May 15

R.I. Insurance Regulation 74, Section 4 enumerates filing requirements. Please reply on an individual company basis, under separate cover, to Teresa DeLuca, Property & Casualty Section.

7. Credit Life/Accident & Health Filing (R.I. Insurance Regulation IX)

Due June 1

See Regulation 9, Section 9, which enumerates filing requirements. Please submit on an individual company basis, under separate cover, to the Life, A & H Section of this Division.

8. Workers' Compensation & Employers' Liability Excess Profits Report:

Due July 1

Each insurance group writing workers' compensation and/or employers' liability insurance is required by R.I.G.L. §27-9-51(a) to file an annual excess profit report on the form prescribed by the Department. Please reply to Eugene Daigneault, Senior Field Auditor.

PLEASE FORWARD TO APPROPRIATE AREAS WITHIN YOUR COMPANY

R.I. Laws and Regulations may be obtained from NILS Publishing at (800) 423-5910 R.I. Laws are also available on-line at: http://www.rilin.state.ri.us/Statutes/Statutes.html, and R.I. Insurance Regulations are available at: http://www.dbr.state.ri.us/rules_regs/id_rules.html



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Department of Business Regulation INSURANCE DIVISION 233 Richmond Street, Suite 233 Providence, RI 02903 – 4233 Telephone No. (401) 222-2223

www.dbr.state.ri.us

FAX No. (401) 222-5475 TDD No. (401) 222-2999

2005 Contracted Producer Report- Due March 1, 2006

R.I. Gen. Laws § 27-2.4-4 requires all insurance companies contracting with insurance producers (individuals and/or business entity) to provide to the Department on March 1 of each year, along with fees due (\$25 per individual producer and/or business entity paid more than \$100 in commissions for business written in Rhode Island), a written report of their contracted insurance producers for the prior calendar year. Companies must submit a report which lists the producer name and/or business entity, license number and/or federal tax id number of each resident and nonresident producer which the company paid at least one hundred dollars (\$100.00) in commissions for business written in Rhode Island during 2005, together with a \$25.00 fee for each individual and/or business entity reported. Please use the following format for reporting:

Insurance Company Name	
NAIC #:Tax ID #:	
Name of Individual(s) and/or Business Entity that Received at least \$100.00 in Commissions during 2005	License No. or Fed. Tax ID No.
1.	
2. 3.	
4.	
5.	
6. ()	
Total number of Contracted producers x \$25.00 =(total formade payable to General Treasurer, State of R.I., must be a	•

I certify that the above report lists all producers, both individuals and business entity, to which the above company paid at least one hundred dollars (\$100.00) of commission for business written in Rhode Island for calendar year 2005.

NAME	AND T	FLEP	HONE	NUMF	3FR	

Please note that even if you have no producers, you are still required to file a "NONE" report. ALL licensed companies must submit this report by March 1, 2006, except HMDIs, HMOs, Surplus Line Carriers, Risk Retention Groups, Title Companies, and Approved or Accredited Reinsurers.

NOTE: For the purpose of this report, companies are not required to maintain a copy of the current producer's license.

Revised 9/19/05, MCS